

Whitestone Hebrew Centre

12-45 Clintonville Street
Whitestone, NY 11357

HIGH HOLIDAY TICKET RESERVATION FORM 2025 -- 5786

Seats: \$100 for members; \$200 for non-members
Children (under 18): Free

Please reserve seats

for ____ adults

Names (Please include addresses of non-members):

for ____ children

Please sign this form and enclose your check for the full amount.
Payment by Credit Card is available by phone or on our website at
www.whitestonehebrewcenter.org.

Signature _____

Address _____

Amt enclosed _____

For office use only:

Member in good standing: ____
Approved by _____
Date _____